#### DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



April 12, 1990

ALL-COUNTY LETTER NO. 90-34

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: STATISTICAL REPORT FOR REFUGEE CASH ASSISTANCE (RCA)
AND REFUGEE DEMONSTRATION PROJECT (RDP) CONCILIATION
(GEN 1172), THE REFUGEE RESETTLEMENT PROGRAM MONTHLY
GRANT REDUCTIONS, TERMINATIONS AND SANCTIONS REPORT
(RS 16 RRP), AND THE ANNUAL REFUGEE ASSISTANCE BY
NATIONALITY REPORT (RS 238)

REFERENCE: ACL 89-107, DATED DECEMBER 29, 1989 and ACL 87-92, DATED JULY 2, 1987

The purpose of this letter is to inform all Counties of a change in the reporting requirements for the Refugee Conciliation Report, currently submitted on Statistical Report (GEN 1172), the Refugee Resettlement Program Monthly Grant Reductions, Terminations, and Sanctions Report (RS 16 RRP), and the Annual Refugee Assistance By Nationality Report (RS 238).

The Federal Office of Refugee Resettlement has informed the State that Federal reimbursement funds for the Refugee Cash and Medical Assistance (CMA) programs have been reduced. As a result, the period of time eligibility for both federally-funded RDP and Aid to Families with Dependent Children (AFDC) has been reduced to a maximum of four months, effective January 1, 1990. Therefore, since the RDP project requires new refugee applicants to have at least six months of time eligibility remaining to be eligible for RDP, and since maximum time eligibility is reduced to four months, there will be no new applicants entering RDP effective January 1, 1990.

#### **GEN 1172**

Effective with the report for the quarter ending March 31, 1990, Counties will no longer be required to count the number of refugee cases entering conciliation under the RDP-FG and RDP-U columns. The number of refugee cases certified as successfully completing conciliation will diminish during the quarter ending March 31, 1990 and will likely be phased out by the quarter

ending June 30, 1990. The number of refugee cases in RCA entering conciliation and the number of refugee cases certified as successfully completing conciliation, however, are to continue to be reported as usual.

A new form, RS 249, has been developed to replace the GEN 1172 previously used to report refugee conciliation activity. The attached copy may be duplicated or a camera-ready copy may be ordered by calling the State Forms Management office at (916) 322-8738. The new RS 249 is to be used beginning with the report quarter ending June 30. 1990.

#### RS 16 RRP

The monthly RS 16 RRP reports submitted for the month ending March 31, 1990 or perhaps earlier for some Counties should begin to show zeroes on Lines 2A and 2B for Part A, Part B, and Part C due to the phase-down of RDP. This form has also been revised to eliminate the RDP data elements. The attached copy may be duplicated or a camera-ready copy may be ordered by calling the State Forms Management office at (916) 322-8738. Counties should begin to use the revised RS 16 RRP upon receipt of this notice.

#### RS 238

The next report date for the Annual Refugee Assistance by Nationality Report is June 30, 1990. Since this report reflects the composition by nationality of the AFDC, RCA, and RDP caseloads on that particular date, and since by June 30, 1990 there will be no more RDP caseload, the RS 238 for June 30, 1990 will show no RDP caseload count.

The RS 238 form has been revised to eliminate the RDP column. The attached copy may be duplicated or a camera-ready copy may be ordered by calling the State Forms Management office at (916) 322-8738. The revised form RS 238 is to be used beginning with the report due for the June 30, 1990 report period.

If you have any questions regarding these refugee reporting requirements, please contact Ms. Valerie Maulet, Statistical Services Bureau, at (916) 323-5087 or ATSS 473-5087.

DENNIS J. BOYLE Deputy Director

Attachments

cc: CWDA

### REFUGEE ASSISTANCE BY NATIONALITY ANNUAL REPORT — (Persons Only)

# SEND ONE COPY TO: Department of Social Services Statistical Services Bureau 744 P Street, M.S. 19-81 Sacramento, CA 95814

COUNTY	STATE USE ONLY	,
	COUNTY	
REPORT PERIOD		

COUNTRY OF ORIGIN		MEDI-CAL		
	AFDC RCA		GA	ONLY
TOTAL				
1. CAMBODIA				MINISTER VERNENNESS AND
2. LAOS (INCLUDING HMONG)				
3. VIETNAM				
4. SOVIET UNION (U.S.S.R.)				
5. POLAND				
6. OTHER EASTERN EUROPEAN COUNTRIES				
7. CUBA				
8. AFGHANISTAN				
9. IRAN				The state of the s
10. IRAQ				
11. ETHIOPIA				
12. OTHER				

COMMENTS

PETISON TO CONTACT REGARDING THIS REPORT	TELEPHONE NUMBER	DATÉ	
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## ANNUAL REPORT REFUGEE ASSISTANCE-BY-NATIONALITY (FORM RS 238)

#### CONTENT

This report provides for the collection and reporting of yearly statistical information by county welfare departments which administer the refugee program under the supervision of the California Department of Social Services. Information is to be collected on time-eligible refugees participating in the following programs: Aid to Families with Dependent Children (AFDC), Refugee Cash Assistance (RCA), General Assistance (GA) and Medi-Cal Only.

#### PURPOSE

The statistical information collected on this report is used by the Refugee and Immigration Programs Branch to meet federal requirements for data collection and to refine the estimates of refugee populations.

Additionally, this report provides legislators, administrators and other interested persons with information regarding the refugee programs.

#### DISTRIBUTION

Information in this report is compiled and distributed yearly to the Federal Department of Health and Human Services, state program managers, county welfare departments and other interested agencies and individuals.

#### REPORT PERIOD

The report date is June 30 of each year. The information should identify only the ending caseload (by persons -- not cases) for the month of June.

#### DUE DATE

The reports are to be received in Sacramento by the fifteenth calendar day of July following the June report month. Mail the report to:

Department of Social Services Statistical Services Bureau 744 P Street, MS 19-81 Sacramento, CA 95814

#### **COLUMN DEFINITIONS**

Country of Origin: The country of origin means the country of citizenship, not necessarily the country from which the refugee arrived. The countries listed in this column are those with the largest number of refugee arrivals in the United States in the recent past.

Cash Assistance: Self-explanatory. Under the Cash Assistance column, information is collected on refugees receiving three types of aid: AFDC, RCA and GA.

Medi-Cal Only: Number of persons eligible only for medical assistance.

#### LINE ITEM DEFINITIONS

These are self-explanatory, with the following clarifications:

Line Item 2: For the purposes of this report, the Laos nationality grouping will include Hmong.

Line Item 6: Other Eastern European countries will include all other Eastern European countries not listed on the report form. These will include Romania, Hungary, Bulgaria and Czechoslovakia.

Line Item 7: The entry under Cuba is not to include Cuban-Haitians.

Line Item 12: The "Other" line item is explained in the Column Instructions Section of these instructions.

#### **COLUMN INSTRUCTIONS**

Line Item 12: If a particular nationality is less than 5 percent of the total refugee welfare population, include those counts in Line Item 12.

Blank Line: Identify the country(ies) of origin not listed in Line Items 1 through 11 from which 5 percent or more of your county's refugee welfare recipients came.

Cash Assistance: Enter for each country listed the number of time-eligible refugees (persons, not cases) within your caseload who are receiving public assistance under the AFDC, RCA or GA programs for whom ORR reimbursement is being claimed. U.S. born babies within a refugee filing unit should be included in all categories.

Medi-Cal Only: Enter for each country listed the number of persons eligible only for Medi-Cal Assistance. Do <u>not</u> include those persons receiving a combination of Cash Assistance and Medi-Cal since these persons should be counted under the Cash Assistance column only.

### REFUGEE ASSISTANCE-BY-NATIONALITY ANNUAL REPORT

#### CONTENT

This report provides for the collection and reporting of yearly statistical information by County welfare departments which administer the refugee program under the supervision of the California Department of Social Services. Information is to be collected on time-eligible refugees participating in the following programs: Aid to Families with Dependent Children, Refugee Cash Assistance, General Assistance and Medi-Cal Only.

#### PURPOSE

The statistical information collected on this report is used by the State Office of Refugee Services to meet the requirements of the Federal Office of Refugee Resettlement (ORR) for data collection and to refine the estimates of refugee populations.

Additionally, this report provides legislators, administrators and other interested persons with information regarding the refugee programs.

#### DISTRIBUTION

Information in this report is compiled and distributed yearly to the Federal Department of Health and Human Services, State program managers, County welfare departments and other interested agencies and individuals.

#### REPORT PERIOD

The report date is June 30 of each year. The information should identify only the ending caseload (by persons - not cases) for the month of June.

#### DUE DATE

The reports are to be received in Sacramento by the fifteenth calendar day of July following the June reporting month. Mail the report to:

Department of Social Services Statistical Services Bureau 744 P Street, M.S. 19-84 Sacramento, CA 95814

#### COLUMN DEFINITIONS

Country of Origin: This means the country of citizenship, not necessarily the country from which the refugee arrived. The countries listed in this column are those with the largest number of refugee arrivals in the United States in the recent past.

Cash Assistance: Self-explanatory. Under the Cash Assistance column, information is collected on refugees receiving three types of aid: Aid to Families with Dependent Children (AFDC), Refugee Cash Assistance (RCA), and General Assistance (GA).

Medi-Cal Only: Number of persons eligible only for medical assistance.

#### LINE ITEM DEFINITIONS

These are self-explanatory, with the following clarifications:

Line Item 3: For the purposes of this report, the Laos nationality grouping will include Hmong.

Line Item 7: Other Eastern European countries will include all other Eastern European countries not listed on the report form. These will include Romania, Hungary, Bulgaria, and Czechoslovakia.

Line Item 8: Do not include Cuban-Haitians in this entry.

Line Items 13 and 14: The blank and "other" line items are explained in the Column Instructions Section of these instructions.

#### COLUMN INSTRUCTIONS

Line Items 12 and 13: Identify the country(ies) of origin not listed in Line Items 2 through 11 from which 5 percent or more of your county's refugee welfare recipients came. If a particular nationality is less than 5 percent of the total refugee welfare population, include those counts in Line Item 14.

Cash Assistance: For each country listed, enter the number of time-eligible refugees (persons, not cases) within your caseload who are receiving public assistance under the AFDC, RCA or GA programs for whom ORR reimbursement is being claimed. U.S.-born babies within a refugee filing unit would be included in all categories.

Medi-Cal Only: For each country listed, enter the number of persons eligible only for Medi-Cal Assistance. Do  $\underline{not}$  include those persons receiving a combination of cash assistance and Medi-Cal, because these persons should be counted under the cash assistance column only.

#### REFUGEE RESETTLEMENT PROGRAM MONTHLY GRANT REDUCTIONS, **TERMINATIONS AND SANCTIONS**

Reports are due on or before the 20th of the month
following the close of the report month.

Send original to:

STATE USE ONLY

Department of Social Services Statisttical Services Bureau 744 P Street, M.S. 19-81 Sacramento, CA 95814

					Send one addittionta	al copy	to your program analyst
County				***************************************	FOR THE M	ONTH OF	
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PART A.	REDUCTIONS		CASES	P	ERSONS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DOLLARS
1.	Aid to Families with Dependent Children	 2.			en e come estama esta mas som engly ( ) - ( ) - ( )		
	A. Family Groups	1		10		19	\$
	B. Unemployed	2		11		20	\$
2.	Refugee Cash Assistance	3		12		21	\$
PART B.	TERMINATIONS						
1.	Aid to Families with Dependent Children						
	A. Family Groups	4		13		22	
	B. Unemployed	5		14		23	
2.	Refugee Cash Assistance	6		15		24	
PART C.	SANCTIONS						
1.	Aid to Families with Dependent Children						
	A. Family Groups	7		16		25	
	B. Unemployed	8		17		26	
2.	Refugee Cash Assistance	9		18		27	
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REPORT PREPA	IRED BY (PLEASE PRINT)	TELEPH	ONE NUMBER		DATE		A THE THE PARTY OF
		11	)				

### REFUGEE RESETTLEMENT PROGRAM MONTHLY GRANT REDUCTIONS, TERMINATIONS AND SANCTIONS

#### FORM 16 RRP

#### CONTENT

This report provides for the collection of monthly information on grant reductions, grant terminations, sanctions, and the savings resulting from these actions, for refugees whose welfare grants are funded under the Refugee Resettlement Program.

#### PHRPOSE

The purpose of this report is to collect data needed to meet federal and state reporting requirements of the Refugee Resettlement Program and for program evaluation.

#### DISTRIBUTION

Data from these reports will be compiled into a summary for use by Department Managers, the Legislature, the Federal Government and other interested agencies and individuals.

#### **DUE DATE**

Reports are to be received in Sacramento on or before the twentieth day of the month following the end of the report month (i.e. October report due November 20th; January report due February 20th). The report shall be sent to:

Department of Social Services Statistical Services Bureau 744 P Street, M.S. 19-81 Sacramento, CA 95814

If the report will be either delayed or incomplete in any way, please contact the Statistical Services Section at (916) 322-2230 or ATSS 492-2230.

#### **DEFINITIONS**

Cases — Cases with grant related actions.

Persons — Persons carried in each of the reported cases. Exception: persons reported in Part C — Sanctions must be limited to the number of persons actually sanctioned.

Dollars — The amount of grant savings during the report month resulting from reductions, terminations or sanctions on the reported cases.

#### INSTRUCTIONS

The report is divided into three parts: Part A — Reductions, Part B — Terminations, and Part C — Sanctions. In each part, report the number of refugee cases and persons whose cash grants were affected by participating in training or accepting an offer of employment during the report month.

#### Part A - Reductions

Report the number of cases and persons whose cash grants were reduced for the first time during the current state fiscal year as a result of training or employment. Subsequent monthly reports should not include these cases and persons as they are to be reported once during a state fiscal year. Should there be a reduction in the cash grant after the beginning of a new state fiscal year, persons and cases reported during the previous fiscal year are to be reported.

Report the initial grant savings and all subsequent net savings resulting from m grant increases/decreases. In computing these net savings, take into account all grant actions for cases and persons reported in previous reports during the state fiscal year.

#### Part B - Terminations

Report the number of cases and persons whose cash grants were terminated as a result of training or employment. Report the total grant savings for the cases reported.

#### Part C — Sanctions

Report the number of cases and persons whose cash grants were sanctioned for refusing to cooperate/participate in program activities or for refusing to accept an appropriate offer of employment. Person counts must e limited to the number of participants actually sanctioned - do not include all members of the cash assistance unit if only the head of household was sanctioned. For the cases reported, provide the total grant savings for the entire length of the sanction (3 or 6 months).

If there is nothing to report on an item, enter "0"; however, if there is nothing to report on any of the items in either Part A, Part B, or Part C, draw a line across the entire part. Zero entries need not be made in this instance.

## REFUGEE CASH ASSISTANCE (RCA) CONCILIATION REPORT

COUNTY:		FOR THE MONTH OF:	YEAR:		
	Number of Cases Entering Conciliation				
	Number of Cases Certified as Successfully Completing Conciliation				
	Number of Cases Sanctioned				
NAME OF COUNTY	Y PERSON TO CONTACT REGARDING THIS REPORT:	PHONE:	DATE:		
REMARKS					

#### CONTENT

This report provides conciliation data on refugee cases in the Refugee Cash Assistance (RCA) Program as mandated by Court Order dated June 26, 1987, in Dang, et al., v. McMahon, et al.. Conciliation is the process that provides an opportunity to resolve conflicts that result in nonparticipation/noncooperation on the part of the recipient.

#### **PURPOSE**

The purpose of this report is to collect data for program evaluation.

#### DISTRIBUTION

Data from these reports will be compiled into a summary for use by Department managers, the Federal Government, and other interested agencies and individuals.

#### <u>DUE DATE</u>

Reports are to be received in Sacramento on or before the twentieth day of the month following the end of the report quarter (i.e. report for quarter ending March due April 20th; report for the quarter ending June due July 20th). The report is to be sent to:

State Department of Social Services Statistical Services Bureau 744 P Street, M.S. 19-81 Sacramento, CA 95814

If the report will be either delayed or incomplete in any way, please contact the Statistical Services Bureau at (916) 322-2230 or ATSS 492-2230.

#### INSTRUCTIONS

The report collects three items of information on conciliation. For the number of cases entering conciliation and for the number of cases certified as successfully completing conciliation, report the number of cases that were funded under RCA. For the number of cases that were sanctioned due to unsuccessful conciliation, report the number of RCA cases. If there is nothing to report in an item, enter "0".

NAME OF COUNTY PERSON TO CONTACT REGARDING THIS REPORT: Enter the name of the person who completed the report form

PHONE: Enter the telephone number of the person completing the form.

DATE: Enter the date the form is completed.

RS 249 (3/90)